

GERIAL NUMBER: 09 / 763277	RECEIPT DATE: 02 / 20 / 01
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ALT TO SATISFACTOR AND A SATIS	
FAMILY NAME: INOKUCHI	At less faced 1 1 VVI 1 she V lane che V V V V V V V
GIVEN NAME: CHIKASHI	DEMAND RECEIVED (Y/N):
PRIORITY CLAIMED (Y/N): Y	PRIORITY DATE: 08 / 20 / 98
NO BASIC FEE (Y/N): N	US DESIGNATED ONLY (Y/N): N
ATTORNEY DOCKET NUMBER: 28569.830	O COUNTRY:
CORRESPONDENCE NAME/ADDRESS: CUSTOME	R NUMBER: 000000 TELEPHONE 6023826291
	FAX

NAME: MICHAEL K KELLY

SNELL & WILMER

STREET: ONE ARIZONA CENTER

400 E VAN BUREN STREET

CITY: PHOENIX

STATE/COUNTRY: AZ ZIP: 850042202

EMAILS

APPLICATION TITLES:

LESER POWER CONTROL DEVICE AND OPTICAL DISK APPARATUS

TAB TO LAST POSITION, FUSH SEND